

**SHERIFF'S AUXILIARY VOLUNTEERS
SECURITY/HOUSE WATCH PATROL LOG**

We are a non-profit organization and any donations are appreciated

*** Required Information**

*Address _____ *City/Zip _____ *PO Box _____

Requested by _____

Type of Property: ☐ Business ☐ Residence Other _____

Alarm System? ☐ Yes ☐ No (if yes, please give alarm company name) _____

Lights left on? ☐ Yes ☐ No (if yes, where?) _____

Would you like a House Watch Window Decal? ____ Yes ____ No Yard Sign? ____ Yes ____ No

Name/address/phone no. of person with key to premises (**NOT HOUSEKEEPER**) _____

Any other person with access to premises: _____

Emergency contact phone: _____ *email: _____

***Permanent Residence (including address/city/zip code)** _____

*I request that a patrol of my property **Start:** ____ (Month) ____ (year) **End:** ____ (Month) ____ (Year)

This application is valid for one (1) year from Start date.

PRINT NAME _____ **SIGNATURE** _____ **Date** _____

(Please do not write below this line)

DATE **TIME** **COMMENTS** **SAV BADGE NUMBER**

Make checks payable to: Navajo County Sheriff's Auxiliary Volunteers (SAV)
PO Box 2590
Snowflake, AZ 85937